



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Certificate Request Form

Request Information

ID	ENTITY NAME	CERTIFICATE TYPE
000556691	Shaker Auto Lease, Inc.	Certificate of Good Standing

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: William Ruffing

Business Name: Shaker Auto Lease, Inc.

No. and Street: 26671 Renaissance Parkway

City or Town: Warrensville Hts

State: OH

Zip: 44128

Country: USA

Contact Phone: 2165810000 ext:

Contact Email: wruffing@shakerautolease.com

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.